Effective Date: August 1, 2006 Last Revision Date: July 20, 2011

## 7.1 Referrals to Child Protective Services (CPS)

**Policy:** In order to assure early detection and treatment, it is imperative and urgent that all newborns with initial positive results promptly receive a diagnostic evaluation (including confirmatory testing) to determine if a disorder exists and that babies with positive confirmatory results are promptly seen and treated by appropriate health care providers. When all resources have been exhausted to get a baby in for confirmatory testing or to be seen by a specialist, and the family has failed to follow instructions or seek medical care for their baby, the ASC staff will contact the NBS Program Nurse Consultant/ASC Contract Liaison to discuss appropriate course of action and determine if the case should be referred to Child Protective Services.

## **Protocol:**

1100001.	
Resp. Person	Action
ASC Project Director/ Coordinator/ Program Specialist	Works with primary care physician t r o contact family and to arrange for family and baby to be tested or seen in the appropriate specialty clinic.
	If unable to find family, contacts local public health department for assistance.
	Seeks assistance from other agencies appropriate to the family's situation (e.g., migrant worker agencies, etc.).
	Documents all attempts at notification of physician, family, and other agencies in SIS case notes.
	When all resources have been exhausted, consults with NBS Program Nurse Consultant/Contract Liaison.
NBS Program Nurse Consultant/Contract Liaison	Discusses case with ASC staff to explore options available for obtaining family compliance.
	Authorizes referral to Child Protective Services, if necessary.